APPLICATION FOR WRSF REGISTRATION FOR RIESENSCHNAUZER

Date: _____

APPLICANT/OWNER: _____ **WRSF MEMBER#:** _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____

CO-OWNER: _____ **WRSF MEMBER#:** _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____

APPLICATION FOR: **Ω Transfer from other registry** **Ω Direct application**
(Fee: $20.00 payable to WRSF)

FULL NAME OF THE DOG: _____
SEX Ω Male Ω Female Date of Birth: _____
COLOR Ω Black Ω Pepper/Salt
PERMANENT ID Ω Tattoo# _____ Ω Microchip# & company: _____
HIP CLEARANCE OFA#: _____ Grade: _____
OTHER HD REGISTRY#: _____ Grade: _____
Current Registration number: _____ AKC / PSK / VDH / OTHER: _____

SIRE: _____
Registration number: _____ AKC / PSK / VDH / OTHER: _____
DAM: _____
Registration number: _____ AKC / PSK / VDH / OTHER: _____

DOCUMENTS ATTACHED
Ω 3 Generation Pedigree from certified Registry (must be original or clean, legible photocopy)
Ω HIP Dysplasia clearance certificate
Ω Proof of working titles by certificate by scorebook other
Ω Proof of conformation title by certificate other

Mail Check and Application to: WRSF Registrar: Chantal Philipona Young 4220 Paradise Dr., Tiburon, CA 94920

APPLICATION FOR LITTER REGISTRATION (Fee: $25.00 payable to WRSF)
Date of birth: _____
SIRE: _____ WRSF registration#: _____
DAM: _____ WRSF registration#: _____

Names of puppies (specify male or female and enter males first)

1. _____ 6. _____
2. _____ 7. _____
3. _____ 8. _____
4. _____ 9. _____
5. _____ 10. _____

I have read and understand the WRSF Registration Policy and Process Guidelines, and certify that this dog (litter) is the progeny of 3 generations (parents, grandparents, great grandparents) of single color breedings.

SIGNATURE(S) of OWNER(S)/CO-OWNER(S): _____

PROTECTED KENNEL NAME REGISTRATION (Fee: $25.00)
Kennel name: _____

FOR WRSF USE ONLY: **WRSF REGISTRATION NUMBER:** _____